

ting better health. The graphic chart method thus not alone gives the doctor the basis for his advice but arouses an earnest endeavor on the part of the children to attain that desired normal weight line.

While this is being accomplished with the child at school, the visitor in the family secures the co-operation of the mother and insures an adequacy of plain food for the child at home. It is seldom actual poverty which has led to the mal-nutrition in the child, so much as the fact that this particular child does not get enough of the food already provided. Often other children in the family are well nourished and plump and yet one or more members are thin and under fed. Here the problem is to see that such a child eats more, has extra lunches, and that a measured amount of food is eaten by him each day. Accurate diet records are of the utmost importance. The home visitor also has the opportunity to advise about sufficient rest, fresh air and proper clothing.

School health work should be a basic and essential element of the educational structure. It is not sufficient or efficient to confine health work to the study of disease. It is both efficient and for children fully sufficient to inaugurate health classes in which the child can be taught personal hygiene and the principles of health out of his own experience. In the Survey for June 1, 1918, Camelia W. Uzzell after describing the excellent results of Dr. Emerson's methods in Boston and New York, says: "The school as the institution that reaches every child, is the logical center for any program of national health, but school health work has heretofore accomplished little, because it has not been made an integral part of the educational system. It is in the school buildings but not in the educational scheme, and no method of health education will be successful until it is made as much a part of school work as reading and arithmetic."

MEASUREMENTS OF AMERICAN SOLDIERS.

Certain considerations in anthropology are of the utmost interest to physicians especially and to all persons interested in social and racial improvement. The relations between certain fixed bony landmarks of the body bear a constant ratio according to race and racial intermixture. The study of the age and development of man is thus a study of his bony landmarks in their changing relations. Ethnology has its roots near this same primitive basis also.

It would seem that the routine examination and measurement of the men of the National Army as well as of other military organizations might to good advantage include a record of certain anthropological data which would be of the utmost scientific interest and value. Such data would be on a scale sufficiently large to allow accurate deductions and would reveal essential characteristics of the national American physique as compared with other races and as blended from other races. This subject has received attention from Dr. Ales Hrdlicka of the Smithsonian Institute and has been

the subject of certain observations on the incoming immigrants at Ellis Island before the great war. It deserves serious attention in the present emergency which affords an opportunity that may never again present. With this thought in mind, an inquiry was sent to the office of the Surgeon-General of the Army and as a result there was received the very interesting and instructive article which appears on another page by Arthur MacDonald.

MacDonald recognizes the importance of this opportunity for securing simple data of scientific value in establishing the American cephalic index, or ratio of length to width of skull. He calls attention to the fact that this index greatly enhances the value of all other measurements, whether physical or psychological. He makes the further statement that these two measurements could easily be taken in the routine examination of recruits and draftees and would add perhaps one minute to the length of the physical examination. He suggests the further consideration that the determination of the cephalic index would be a valuable means of further identification of soldiers.

EDITORIAL COMMENT.

An interesting and suggestive paper on "State Board Problems" by Dr. Charles B. Pinkham, Secretary of the California Board of Medical Examiners, was read by title at the annual meeting of the Federation of State Medical Boards at Chicago in February, 1918. Two of his comments are especially worthy of repetition. "The medical society of each state could well afford to establish a publicity bureau under the supervision of a trained salaried newspaper writer who would keep the daily press supplied with articles educationally constructive, thus affording the public an opportunity to become conversant with important problems. The impetus of such a campaign would carry weight in legislative halls and would be of material benefit in effecting a whole-hearted support in efforts to suppress the violator, quack and charlatan." And again, speaking of the advertising medical specialist and quack "clinical laboratory," "the activities of the federal authorities in handling the venereal problem as a part of the national plan of efficiency, will be of material benefit in eradicating this class of medical parasite. It is to be hoped that federal regulation bearing on traffic in salvarsan or other anti-luetic specifics will effectively force these 'quacks' to flight or imprisonment."

Did you ever stop to consider what a large and definite number of votes the doctor can influence and often direct at the primaries and elections? It might be worth while for each individual doctor to exercise a little more conscious care in the suggestions and opinions he gives among his friends and patients as to candidates and measures up for election. Even the hardened politician is finding it much to his interest to support men and measures which will receive the active support of the doctors.

An example worthy of emulation is described in the May issue of the State Board of Health Bulletin, where is told the story of the sanitization of the entire district surrounding Camp Fremont in the Santa Clara valley. Every hotel, restaurant, eating house, lunch room, cafe, cafeteria, soda fountain, ice cream parlor, soft drink stand, fruit and vegetable stand, meat market, bakery, grocery, creamery, dairy, and every other place where food is manufactured or sold, has been put in perfect sanitary order. Moreover this condition of perfection is being maintained by frequent and thorough inspections. This means that all such places are clean, screened, flyless, and provided with clean and sterilized dishes and food utensils. Those serving and preparing food are in good health. And altogether, it has been very much worth while. It has given the soldier proper sanitary protection. It is no more than what ought to be done with our present idea of sanitation. Yet why should not similar campaigns be inaugurated in every city, town and hamlet of the state? Why would not the advantages be just as manifest in each of these as at Camp Fremont? If the people want such sanitation they can have it. Why not educate them in its merits and lead them to insist on it?

W. L. Treadway calls attention in the Public Health Reports for May 17, 1918, to certain elements in the personality of feeble-minded children which are not considered in the formal psychological tests so much in vogue and which require the service of a trained psychiatrist to evaluate. He finds certain such constitutional traits of sufficient frequency to justify a tentative classification into types, such as those with shut-in tendencies, those with manic depressive-like reactions, those allied to the manic depressive group, those who show the egoistic and epileptic temperament, and those who show a fatuous temperament. This serves to emphasize the close relation probably existing between the higher types of mental deficiency and those psychic disorders usually regarded as insanity. Recognition of these types of personality in the feeble-minded, permits earlier inauguration of efficient prophylaxis against later social and mental catastrophe, by earlier segregation on the one hand, and by early replacement of vicious tendencies through proper education.

The Owl Drug Company, owning a "chain" of some twenty-five stores in this State, announces that it will operate on a "bone-dry" basis, even to the extent of using every effort to keep alcoholic preparations from soldier and sailor patrons so far as is possible. A few years ago, these stores featured the sale of liquors at "cut" prices and drove a big trade in alcoholics. This is one of the straws that are showing the direction of the air currents in California.

Original Articles

METABOLISM IN DIABETES, NEPHRITIS AND CHOLECYSTITIS.*

By LORENA M. BREED, M. D., Pasadena, California.

In a generously fed community such as may be found anywhere in America to-day, a large majority of the people are overfed, and when people are continuously overfed, sooner or later we find that they have diseases due to a changed body chemistry. The body is a veritable chemical laboratory, with every organ constantly engaged in the chemical processes of elaborating from the ingested food, the chemical constituents necessary for tissue, bone and blood, as well as the power for running the body mechanism and carrying off the waste. Each of the organs of digestion and excretion have individual functions to perform in this process, and their action is inter-dependent and harmonious. The food is dismembered, oxidized, and made ready for absorption into new body cells while the worn out cellular material is simultaneously carried away. Normally, and without overfeeding this is accomplished without friction, but with dietary excesses, a constant stress is placed upon the organs of digestion and excretion. They become overworked and weakened so that waste products accumulate in the body and the delicately adjusted mechanism becomes unbalanced. If the dietary excesses are halted here, the mechanism adjusts itself and goes on normally as before. If not, the stress and friction increases. Not only do waste products accumulate, but poisonous products of imperfect digestion become absorbed into the blood-stream, the mechanism becomes more and more unbalanced by the poisons absorbed, and we have a pathological physiology, due to a faulty metabolism with a possible lowered function of one or more of the overworked organs. Even this condition can be changed by a properly adjusted diet that will allow the tired organs time for rest, recuperation and excretion of the accumulated products of imperfect metabolism. But if the dietary excesses are allowed to continue for months and years, the organ functions become depressed, weakened, and insufficient, and we have as a result a set of symptoms, a clinical entity which we call disease, caused by faulty metabolism, the ultimate cure of which depends upon the degree of insufficiency of the organ or organs concerned. At the present time 95% of all diseases may be classed under this head and by far the most of them are caused by dietary excesses, either general overfeeding or an excess of certain articles of diet.

Of the diseases due to faulty metabolism, diabetes and nephritis are probably the most easily recognized, and in both of these diseases the above statements are borne out by the fact that certain dietary restrictions and adjustments are always followed by improvement, if not complete recovery, especially if recognized while the pathology is still chemical and not cellular.

The primary defect in diabetes is an inability to

* Read before the Forty-seventh Annual Meeting of the Medical Society of the State of California, Del Monte, April, 1918.